



ELECTRICAL PERMIT APPLICATION

BUILDING INSPECTION, PO BOX 40, ROOM 118
CHESTERFIELD VA 23832
Office: 804-748-1057; Fax: 804-751-4713; www.chesterfield.gov/bi
Inspection Scheduling: 804-751-4444

ELECTRICAL PERMIT # :

ASSOCIATED PERMIT # :

WORK DESCRIPTION	WHAT TYPE OF WORK IS TO BE PERFORMED (PLEASE CHECK)		RESIDENTIAL	COMMERCIAL
	WHAT TYPE OF IMPROVEMENT WILL BE MADE? PLEASE DESCRIBE:			
ID	CONTRACTOR NAME:		CONTRACTOR ID #:	CONTRACTOR'S PHONE #:
CONTACT	PRIMARY CONTACT PERSON:			CONTACT'S PHONE #:
	CONTACT'S E-MAIL ADDRESS:			
OWNER	PROPERTY OWNER NAME (FIRST NAME, LAST NAME OR COMPANY NAME):			OWNER PHONE #:
	PROPERTY OWNER MAILING ADDRESS (SKIP, IF MAILING ADDRESS IS SAME JOB LOCATION):			
	PROPERTY OWNER CITY/STATE/ZIP (SKIP, IF MAILING ADDRESS IS THE SAME AS JOB LOCATION):			
JOB INFO	ADDRESS/LOCATION OF WORK TO BE PERFORMED (STREET #/STREET NAME/STREET TYPE OR SUBDIVISION LOT/BLOCK/SECTION):			
	IF APPLICABLE, WHAT IS THE SHOPPING CENTER NAME OR BUILDING NAME?		TENANT NAME	
	(COMMERCIAL PROJECTS ONLY) PLEASE CHECK PAYMENT OPTION, IF APPLICABLE : ENTERPRISE ZONE COUNTY PROJECT		IDT # FOR DEFERRED PAYMENT-SCHOOL BOARD/UTILITIES ONLY:	
ELEC	WHAT IS THE ESTIMATED COST OF ELECTRICAL WORK ONLY (materials and labor)? Do not include the cost of structural, plumbing, mechanical or other auxiliary work in this estimate.			EST. COST OF WORK: \$

APPLICANT	APPLICANT NAME (PLEASE PRINT):		
	REPRESENTING (NAME OF COMPANY)		
	APPLICANT SIGNATURE:		DATE:
OWNER AFFIDAVIT	<p align="center">Complete this section only if you are an OWNER doing your own work, and are not subject to licensure as a contractor or subcontractor.</p> <p>If you are an owner and intend to do the work or subcontract the work out, an Owner Affidavit is required certifying that you are the owner of this tract or parcel of land, that you have applied for this permit, and are not subject to licensing as a contractor or subcontractor. Signing the Owner Affidavit, and in turn obtaining the permit in your name makes you, as the owner, responsible for the quality of the work and compliance with applicable state and local codes. This "Owner Affidavit" must be completed, with the signature of a person who witnessed your signature to this document, acknowledging your compliance with Section 54.1-1111 of the Code of Virginia. (Note: Lessees are owners per state law.)</p> <p>I, as the owner, will be responsible for the work performed on my property, and shall be responsible for compliance with all state laws regulating building construction and use, and compliance with all county ordinances.</p>		
	OWNER'S SIGNATURE:	DATE:	PLEASE PRINT OWNER NAME LEGIBALLY:
	<p>I, as a witness, saw the owner of this property affix his signature to this owner affidavit, certifying that he is not subject to licensure as a contractor or subcontractor in the state of Virginia.</p>		
	WITNESS' SIGNATURE:	DATE:	PLEASE PRINT WITNESS' NAME LEGIBALLY:
OFFICE USE ONLY	ELECTRICAL PERMIT FEE:		4/21/2006 9:09:00 AM
	\$		
	OTHER FEE:		
	\$		
	ASSOCIATED CREDIT CARD FEE:		
	\$		
	STATE LEVY:		
	\$		
TOTAL PERMIT FEE:			
\$			
CASHIER:	CHECK #:	DATE:	